



# Summary of most common feedback from breakout sessions

# Building Resilient Communities in Maryland: A Stakeholder Forum

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#### **Data needs:**

- How to get data into compromised health communities
- Integration of federal / state level data with local, family, health, housing, data, etc.
- Organization and dissemination of current data with explanation to communities and technical assistance
- How to get the data, how to use the data, how to provide trouble shooting.

### Connection of health and planning in your community:

- Largely not happening
- Individuals aren't even aware of planning going on.
- Legislative requirements and changes to require planning to consider health and environmental implications
- Planning should address the barriers to healthcare and healthcare resources during development phase
- Community members need to be involved from the beginning

## Most pressing health issue in your community:

- School climate: lead, temperature, safety
- Cancer clusters
- Asthma
- Access food, healthcare, information
- Environment and health overlap
- Community level concerns: SES, police interactions, community centers, local government involvement

### Any insights or action items:

- Tailoring message
- New opportunities for health communication: school events, senior bus trips, events, gimmicks
- Sharing resources and information
- Identifying people / groups and getting them to work together.
- Outreach

## What is your communities pressing need?

- Engagement / communication
- Lack of safe spaces for different stakeholders to express their opinions and feelings. Lack of trust between groups
- Misinformation and how to combat it; subject matter communication
- Getting more people to the table: youth, political leaders, health departments, students, civic engagement; ongoing identification of new stakeholders

#### Other

- Giving a voice to the most vulnerable / impacted
- Communities pride, civic engagement, breaking the silos, new groups
- Needs: data, data explanation, expertise for data and applications
- Health and planning need to integrate and work together
- Market forces / money / grants ending before work is completed / lack of continuation